

BERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C.  
1105 New York Avenue, N.W., Suite 600  
Washington, DC 20005-3934

FORM PTO-1083

In re application of: BUSH *et al.*

Attorney Docket No. 0609.4350000

Appl. No. 08/816,122

Filed: March 11, 1997

For: Method for the Identification of Agents for Use in the Treatment of Alzheimer's Disease

THE ASSISTANT COMMISSIONER FOR PATENTS  
Washington, D.C. 20231

Sir:

Transmitted herewith is a response to NTFMP in the above-identified application.

- Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
- A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
- No additional claim fee is required.

The claim fee has been calculated as shown below:

	(Col. 1)		(Col. 2)		(Col. 3)
	Claims Remaining After Amendment		Highest No. Previously Paid For		Present Extra
TOTAL	* 43	MINUS	** 20	=	23
INDEP.	* 10	MINUS	** 3	=	7
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					

SMALL ENTITY	
Rate	Addit. Fee
x 11 =	\$ 00.00
x 40 =	\$ 00.00
+130 =	\$ 00.00
Total Addit. Fee	\$ 00.00

Or

OTHER THAN A SMALL ENTITY	
Rate	Addit. Fee
23 x 22 =	\$ 506.00
7 x 80 =	\$ 560.00
+ 260 =	\$ 260.00
TOTAL	\$ 1,326.00

OR

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col 1 of a prior amendment or the number of claims originally filed.

- Please charge my Deposit Account No. 19-0036 in the amount of \$\_\_\_\_\_. A duplicate copy of this sheet is attached.

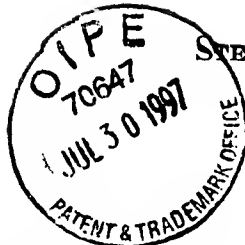
XX A check in the amount of \$2,336.00 is attached for \$110.00 one-month Extension of Time; \$130.00 for surcharge for late filing fee of Declaration; \$770.00 basic filing fee for appln.; and \$1,326.00 for additional claim fees.

XX The U.S. Patent and Trademark Office is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-0036. A duplicate copy of this sheet is attached.

- XX Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
- XX Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

Raz E. Fleschner July 30, 1997  
Raz E. Fleschner  
Registration No. 34,331e Date



**STERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C.**

ATTORNEYS AT LAW

SUITE 600

1100 NEW YORK AVENUE, N.W.

WASHINGTON, D.C. 20005-3934

(202) 371-2600

FACSIMILE: (202) 371-2540

ROBERT GREENE STERNE  
EDWARD J. KESSLER  
JORGE A. GOLDSTEIN  
SAMUEL L. FOX  
DAVID K.S. CORNWELL  
ROBERT W. ESMOND  
TRACY-GENE G. DURKIN  
MICHELE A. CIMBALA  
MICHAEL B. RAY  
ROBERT E. SOKOHL  
ERIC K. STEFFE  
ANDREA G. REISTER

DANIEL N. YANNUZZI  
WILLIAM C. ALLISON V  
MICHAEL O. LEE  
G. KEVIN TOWNSEND\*  
JOHN M. COVERT\*  
ANNE BROWN  
LINDA E. ALCORN  
RAZ E. FLESHNER  
ROBERT C. MILLONIG  
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MICHAEL V. MESSINGER  
LORI L. KERBER\*

JUDITH U. KIM\*  
KEITH KINO\*  
TIMOTHY J. SHEA, JR.\*  
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MICHAEL A. RAHMAN\*  
STEPHEN G. WHITESIDE\*  
NOEL B. WHITLEY\*

DONALD J. FEATHERSTONE\*\*  
LAWRENCE B. BUGAISKY\*\*  
KAREN R. MARKOWICZ\*\*  
KIMBERLIN M. TOOHEY\*\*

\*BAR OTHER THAN D.C.  
\*\*REGISTERED PATENT AGENTS

WRITER'S DIRECT NUMBER:

July 30, 1997

INTERNET ADDRESS:

Assistant Commissioner for Patents  
Washington, D.C. 20231

**Box: Missing Parts**

Re: U.S. Patent Application  
Appl. No. 08/816,122; Filed: March 11, 1997  
For: **Method for the Identification of Agents for Use in the  
Treatment of Alzheimer's Disease**  
Inventors: BUSH *et al.*  
Our Ref: 0609.4350000/REF

Sir:

Transmitted herewith for appropriate action are the following documents:

1. Copy of Notice to File Missing Parts of Application--Filing Date Granted;
2. Petition for Extension of Time;
3. Original Declaration for patent application, executed by inventors;
4. Original executed Power of Attorney from Assignee;
5. Original Assignee's Certificate under 37 C.F.R. § 3.73(b) with copy of assignment attached;

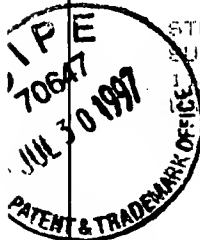


UNITED STATES DEPARTMENT OF COMMERCE  
Patent and Trademark Office  
Address: COMMISSIONER OF PATENTS AND TRADEMARKS  
Washington, D.C. 20234

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO./TITLE
08/816,122	03/11/97	ATWOOD	0809, 122, 0000

0222/0430

NOT ASSIGNED



STERNE KESSLER GOLDSTEIN & FOX  
SUITE 600  
1100 NEW YORK AVENUE NW  
WASHINGTON DC 20005-3934

1815

DATE MAILED:

REF 5/7/97 → CLK

04/30/97

17/97

**NOTICE TO FILE MISSING PARTS OF APPLICATION**  
**Filing Date Granted**

An Application Number and Filing Date have been assigned to this application. However, the items indicated below are missing. The required items and fees identified below must be timely submitted **ALONG WITH THE PAYMENT OF A SURCHARGE** for items 1 and 3-6 only of \$ 1500 for a ☒ large entity ☐ small entity in compliance with 37 CFR 1.27. The surcharge is set forth in 37 CFR 1.16(e). Applicant is given **TWO MONTHS FROM THE DATE OF THIS NOTICE** within which to file all required items and pay any fees required above to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

If all required items on this form are filed within the period set above, the total amount owed by applicant as a ☒ large entity ☐ small entity (verified statement filed), is \$ 2220.

1. The statutory basic filing fee is:

- ☒ missing.  
☐ insufficient.

Applicant must submit \$ 770 to complete the basic filing fee and/or file a verified small entity statement claiming such status (37 CFR 1.27).

2. Additional claim fees of \$ 1320, including any multiple dependent claim fees, are required. Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.

3. The oath or declaration:

- ☒ is missing.  
☐ does not cover the newly submitted items.  
☐ does not identify the application to which it applies.  
☐ does not include the city and state or foreign country of applicant's residence.

An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the application by the above Application Number and Filing Date is required.

4. The signature(s) to the oath or declaration is/are:

- ☐ missing.  
☐ by a person other than inventor or person qualified under 37 CFR 1.42, 1.43, or 1.47.

A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.

5. The signature of the following joint inventor(s) is missing from the oath or declaration:

An oath or declaration listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.

6. A \$ \_\_\_\_\_ processing fee is required since your check was returned without payment (37 CFR 1.21(m)).

7. Your filing receipt was mailed in error because your check was returned without payment.

8. The application does not comply with the Sequence Rules.

See attached "Notice to Comply with Sequence Rules 37 CFR 1.821-1.825."

9. OTHER:

Direct the response and any questions about this notice to "Attention: Box Missing Parts."

**A copy of this notice MUST be returned with the response.**

Customer Service Center  
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